

Name
in
Full

Infant-

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at <u>Denton</u> Town		<u>Carroll</u> County		MARYLAND	
Date of death 190 <u>8</u>	Month <u>5</u>	Day <u>25</u>	Age <u>3 days</u>	Months <u>1</u>	Days <u>1</u>
Sex <u>male</u>	Color or Race <u>white</u>		Birth- place <u>Denton</u>		
Married, Single or Widowed			Occupation		
Name of Wife or Husband					
Father's Name <u>Chas Boone</u>			Father's Birthplace <u>Ind</u>		
Mother's Maiden Name <u>Annie Rn</u>			Mother's Birthplace <u>Ind</u>		
Name of person giving In formation			How related to deceased		

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary <u>Diphtheria</u>	How long
Immediate	How long
Are the name, age, sex, color, date and place correctly given above?	Signature of Physician <u>M. W. [Signature]</u>
	Address <u>[Redacted]</u>
Accident or Suicide?	



Name
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Full

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

James Harrison Frazer		Town		County		MARYLAND	
Died at Ridgely		Caroline					
Date of death 1903		Month May		Day 27		Age 79	
Sex Male		Color or Race White		Birth-place Rupert Vermont		Months 8	
Married, Single or Widowed Married		Occupation Farming & Real estate					
Name of Wife - Alice Banarsdale		Clayton		Frazer			
Father's Name Martin Frazer		Father's Birthplace New York					
Mother's Maiden Name Charcey Whitney		Mother's Birthplace Connecticut					
Name of person giving information Eldah Clayton Frazer Smith		How related to deceased		Daughter			

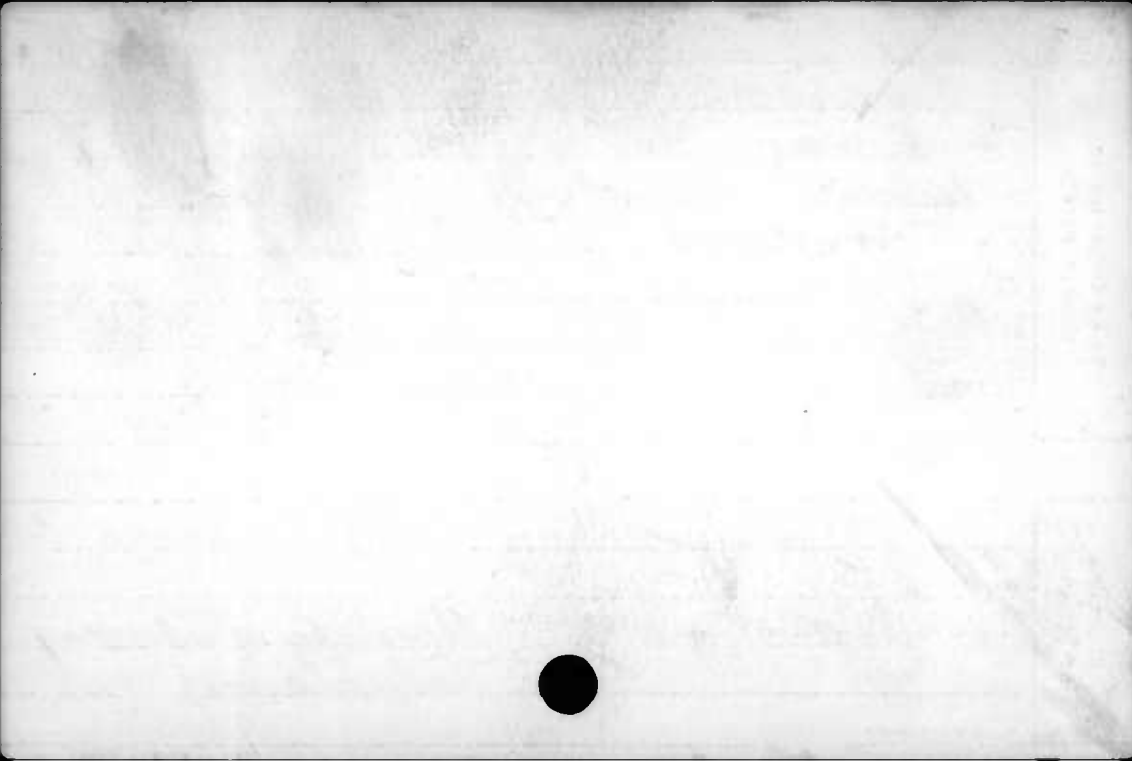
CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary Cystitis - Semility		How long 3 Months	
Immediate Exhaustion		How long 1 week	
Are the name, age, sex, color, date and place correctly given above? yes		Signature of Physician J. C. Madara M.D.	
		Address Ridgely Md.	
Accident or Suicide? No.			



Name in Full <i>Mary Garrett</i>		CERTIFICATE OF DEATH	
TO BE ANSWERED BY NEAREST FRIEND	Died at <i>Burrsville</i> Town		<i>Carroll</i> County
	Date of death 190 <i>3</i>		Month <i>May</i> Day <i>14</i> Years <i>43</i> Months <i>—</i> Days <i>—</i>
	Sex <i>Female</i>	Color or Race <i>White</i>	Birth-place <i>Carroll Co Md</i>
	Married, Single or Widowed <i>Widowed</i>	Occupation	
	Name of Wife or Husband <i>Thos Garrett</i>		
	Father's Name <i>John Rathell</i>	Father's Birthplace	
	Mother's Maiden Name <i>Mary Rathell</i>	Mother's Birthplace	
	Name of person giving information <i>Thos Garrett</i>	How related to deceased	
CAUSES OF DEATH			
PHYSICIAN OR CORONER	Primary <i>Old age</i>	How long <i>131</i>	
	Immediate	How long	
	Are the name, age, sex, color, date and place correctly given above?	Signature of Physician <i>Thos Garrett</i>	
		Address	
	Accident or Suicide?		



Name
in
Full

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

Died at		Town		County		MARYLAND					
Date of death 190		3	Month	may	Day	10	Age	60	Years	Months	Days
Sex		female		Color or Race		white		Birth-place		md	
Married, Single or Widowed		widow		Occupation		housewife					
Name of Wife or Husband											
Father's Name				Father's Birthplace							
Mother's Maiden Name				Mother's Birthplace							
Name of person giving Information				How related to deceased							

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Phthisis	How long	years
Immediate		How long	
Are the name, age, sex, color, date and place correctly given above?	yes	Signature of Physician	R Kemp Jefferson
		Address	Federalsburg md
Accident or Suicide?			



Name in Full		James G Redden				CERTIFICATE OF DEATH		
TO BE ANSWERED BY NEAREST FRIEND		Died at		Town Denton	County Caroline		MARYLAND	
		Date of death 190	3	Month May	25	Day	Age 87	Years 10
		Sex	Male		Color or Race	White		Birth-place Del
		Married, Single or Widowed		Occupation				
		Name of Wife or Husband						
		Father's Name Stephen Redden				Father's Birthplace Del		
		Mother's Maiden Name Mary Redden				Mother's Birthplace Del		
PHYSICIAN OR CORONER		Name of person giving Information				How related to deceased		
		CAUSES OF DEATH						
		Primary				How long		
		Immediate				How long		
		Are the name, age, sex, color, date and place correctly given above?				Signature of Physician		
		Accident or Suicide?				Address		
						Denton		
						MD		



Name
in
Full

Mary E. Starns

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

MARYLAND

Died at <u>Denton</u> Town		<u>Caroline</u> County			
Date of death 190 <u>3</u>	Month <u>May</u>	Day <u>17</u>	Years <u>24</u>	Months <u>—</u>	Days <u>—</u>
Sex <u>Female</u>	Color or Race <u>White</u>		Birth-place <u>Ind</u>		
Married, Single or Widowed <u>Married</u>		Occupation <u>Housewife</u>			
Name of Wife or Husband <u>Carroll Starns</u>					
Father's Name <u>George R. Male</u>			Father's Birthplace <u>Ind</u>		
Mother's Maiden Name <u>Phoebe Curce</u>			Mother's Birthplace <u>Ind</u>		
Name of person giving information <u>Frank Jones</u>			How related to deceased <u>Brother in law</u>		

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	<u>Bright's Disease</u> <u>120</u>	How long	<u>few months</u>
Immediate	<u>Purpura Eclampsia</u>	How long	<u>few minutes</u>
Are the name, age, sex, color, date and place correctly given above? <u>Yes</u>		Signature of Physician <u>P. R. Fisher</u>	
		Address <u>Denton Ind</u>	
Accident or Suicide? <u>No</u>			

Buried at Sinton
May 19 -

Name
in
Full

Clyde Wilson

CERTIFICATE OF DEATH

TO BE ANSWERED BY
NEAREST FRIEND

MARYLAND

Died at

Benton

Town

Caroline

County

Date

of death 1903

Month

May

Day

2

Age

Years

32

Months

6

Days

Sex

Male

Color or
Race

White

Birth-
place

Maryland

Married, Single
or Widowed

Single

Occupation

Farmer

Name of Wife or
HusbandFather's
Name

James Wilson

Father's
Birthplace

Maryland

Mother's
Maiden Name

Susan Halbrook

Mother's
Birthplace

Maryland

Name of person giving
information

James Wilson

How related
to deceased

Father

CAUSES OF DEATH

Primary

Pistol shot, in head with a large

How long

Immediate

quantity of Paris green dust for poison

How long

24 hours

Are the name, age, sex, color, date
and place correctly given above?

Yes

Signature of
Physician

Address

Enoch George M. W.
Newer Caroline Co. Md

Accident or Suicide?

PHYSICIAN
OR CORONER

